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LEVINE, JEROME (Public Health Service), and MONROE, JACK J.: Discharge of narcotic drug addicts against medical advice. Public Health Reports, Vol. 79, January 1964, pp. 13-18.

Two hundred twenty-eight male voluntary narcotic addict patients admitted to the Public Health Service Hospital at Lexington, Ky., were studied to elucidate factors which might be associated with their leaving the hospital against medical advice or remaining until hospital treatment was completed. A personality inventory of 400 items and 37 other variables were coded on data cards, and

statistical analysis was performed using automatic data processing methods.

Both personality and nonpersonality variables, as well as the interaction between variables, were found to be important in determining whether a patient will leave the hospital against medical advice. The presence or absence of court pressure was the single most important variable.

DAY, ROBERT W. (University of California School of Medicine, Los Angeles): Completeness of birth certificate reporting for mongolism (Down's syndrome). Public Health Reports, Vol. 79, January 1964, pp. 19-24.

A survey of birth certificates of institutionalized patients with a clinical diagnosis of Down's syndrome indicated that under-reporting of this condition at birth is appreciable. However, completeness of reporting for the group varied from 0 percent for patients born in the 1933-39 period to almost 50 percent for those born in the 1950-56 period.

Analysis of cases of those born between

1950 and 1956, the largest subsample, by maternal age at parturition, population of place of birth, birth weight, clinical signs of Down's syndrome on current examination, complications of labor and delivery, and other congenital malformations revealed no differences between the groups with and without mention of the diagnosis on the birth certificate.

THAYER, JAMES D. (Public Health Service), and MARTIN, JOHN E., JR.: A selective medium for the cultivation of *N. gonorrhoeae* and *N. meningitidis*. Public Health Reports, Vol. 79, January 1964, pp. 49-57.

A medium with selective properties which permit growth of gonococci and meningococci while inhibiting most other *Neisseria* species was prepared by adding polymyxin B (25 units per milliliter) and ristocetin (10 micrograms per milliliter) to conventional diagnostic media.

Overgrowth of gonococcal colonies by bacterial contaminants encountered in cervical, vaginal, and rectal specimens was almost totally prevented, and the sometimes diagnostically confusing *Mima polymorpha* var. *oxidans* failed to grow.

FAVERO, MARTIN S. (Washington State University, Pullman), DRAKE, CHARLES H., and RANDALL, GEORGANNE B.: Use of staphylococci as indicators of swimming pool pollution. Public Health Reports, Vol. 79, January 1964, pp. 61-70.

The predominant bacterial flora of 12 public, university, and private swimming pools were studied for a 2-year period to determine the validity of present standards for measuring the water's sanitary quality. Selective media used with the membrane filter method provided a means for the quantitative determination of staphylococci, coliform bacteria, enterococci, *Streptococcus salivarius*, and *Pseudomonas aeruginosa*. Both Chapman-Stone agar and phenol red mannitol salt agar were highly efficient and specific for the isolation of staphylococci.

Intestinal bacteria in pool waters were always accompanied by large numbers of staphylococci and streptococci. However, large numbers of staphylococci were frequently found when no coliform

bacteria or enterococci were present and when the total count per ml. was low. These results indicated that the present standards used to determine the sanitary quality of swimming pools based on the presence of the coliform bacteria and the total count are inadequate.

It was suggested that the staphylococci be adopted as indicators of pollution in swimming pools. They are valid indicators of pollution derived from the mouth, nose, throat, and skin surfaces of bathers and are obviously of concern since they are potential pathogens. Because they are more chlorine resistant than coliform bacteria, the absence of large numbers of staphylococci implies the absence of intestinal bacteria. The authors propose an allowable maximum of less than 100 staphylococci per 100 ml. of water.

The nature of a paper, not its importance or significance, determines whether a synopsis is printed. See "Information for Contributors" on next page.

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